

Application Data Sheet

Application Information

Application Type::	Continuation
Subject Matter::	Utility
Suggested Group Art Unit::	Not Yet Assigned
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHOD AND DEVICE FOR USE IN MINIMALLY INVASIVE APPROXIMATION OF MUSCLE AND OTHER TISSUE
Attorney Docket Number::	399242000602
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	24
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	George
Middle Name::	D.
Family Name::	HERMANN
City of Residence::	Portola Valley
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	214A Grove Drive
City of mailing address::	Portola Valley

State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94028

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jose
Family Name:: DE LA PENA
City of Residence:: Lomas Virreyes
Country of Residence:: Mexico
Street of mailing address:: Acueducto rio hondo #26
City of mailing address:: Lomas Virreyes
Country of mailing address:: Mexico
Postal or Zip Code of mailing address:: 11000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Roger
Family Name:: DE LA TORRE
City of Residence:: Wentzville
State or Province of Residence:: MO
Country of Residence:: US
Street of mailing address:: 2312 Longest Drive
City of mailing address:: Wentzville
State or Province of mailing address:: MO
Postal or Zip Code of mailing address:: 63385

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas

Middle Name:: A.
Family Name:: HOWELL
City of Residence:: Palo Alto
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 567 Homer Avenue
City of mailing address:: Palo Alto
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94301

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Roger
Family Name:: KHOURI
City of Residence:: Key Biscayne
State or Province of Residence:: FL
Country of Residence:: US
Street of mailing address:: 328 Crandon Boulevard #227
City of mailing address:: Key Biscayne
State or Province of mailing address:: FL
Postal or Zip Code of mailing address:: 33149

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Family Name:: WILLIS
City of Residence:: Palo Alto
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 850 College Avenue

City of mailing address:: Palo Alto
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94306

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Family Name:: DREWS
City of Residence:: Sacramento
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 4524 U Street
City of mailing address:: Sacramento
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 95817

Correspondence Information

Correspondence Customer Number:: 20872

Representative Information

Representative Customer Number:: 20872

Assignee Information

Assignee name:: Thomas J. Fogarty, M.D.
3270 Alpine Road
Portola Valley, CA 94028

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/969,989	10/02/01
09/969,989	Continuation of	09/738,818	12/15/00
09/738,818	An application claiming the benefit under 35 USC 119(e)	60/172,426	12/17/99